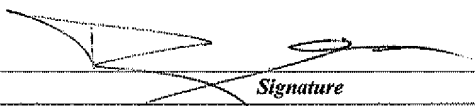


AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17528									
Applicant(s): Masaya Fujita														
Application No. 10/799,795	Filing Date March 12, 2004	Examiner Philip Robert Smith	Customer No. 23389	Group Art Unit 3739	Confirmation No. 8301									
Invention: ENDOSCOPIC SYSTEM FOR OPERATING MEDICAL DEVICE BY VOICE														
COMMISSIONER FOR PATENTS:														
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.														
CLAIMS AS AMENDED														
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE									
TOTAL CLAIMS	14 -	20 =	0	x \$50.00	\$0.00									
INDEP. CLAIMS	3 -	3 =	0	x \$210.00	\$0.00									
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.														
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.														
 _____ <i>Signature</i>			Dated: April 3, 2008											
Thomas Spinelli Reg. No. 39,533 SCULLY, SCOTT, MURPHY & PRESSER, P.C. 400 Garden City Plaza, Ste. 300 Garden City, NY 11530 (516) 742-4343 TS:DAT:jam			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____.</td> </tr> <tr> <td style="text-align: center;">_____ (Date)</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ <i>Signature of Person Mailing Correspondence</i></td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ <i>Typed or Printed Name of Person Mailing Correspondence</i></td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____.		_____ (Date)		_____ <i>Signature of Person Mailing Correspondence</i>		_____ <i>Typed or Printed Name of Person Mailing Correspondence</i>	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____.														
_____ (Date)														
_____ <i>Signature of Person Mailing Correspondence</i>														
_____ <i>Typed or Printed Name of Person Mailing Correspondence</i>														
CC:														